

RECEIVED  
CENTRAL FAX CENTER

MAY 23 2006

# FAX

|                                                       |                                                                           |
|-------------------------------------------------------|---------------------------------------------------------------------------|
| <b>TO:</b><br>Commissioner for Patents,<br>Mail Stop: | <b>FROM:</b><br>C. Douglass Thomas<br>Ph: 650-903-9200, Fax: 650-903-9800 |
| <b>COMPANY:</b><br>United States Patent Office        | <b>DATE:</b><br>5/23/2006                                                 |
| <b>FAX NUMBER:</b><br>571-273-8300                    | <b>NO. OF PAGES (INCLUDING COVER):</b><br>27                              |
| <b>PHONE NUMBER:</b>                                  | <b>SENDER'S REFERENCE NUMBER:</b><br>WVANP012                             |
| <b>RE:</b>                                            | <b>RECIPIENT'S REFERENCE NUMBER:</b><br>09/813,235                        |

## NOTES/COMMENTS:

Transmitted herewith are the following documents for entry into the above-noted file:

|                                     |          |
|-------------------------------------|----------|
| Amendment F Transmittal             | 1 page   |
| Credit Card Payment Form (PTO-2038) | 1 page   |
| Amendment F                         | 12 pages |
| Information Disclosure Statement    | 2 pages  |
| Form 1449                           | 1 page   |
| 1 cited reference                   | 9 pages  |

RECEIVED  
CENTRAL FAX CENTER

MAY 23 2006

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: WOODWARD et al.

Attorney Docket No.: WVANP012

Application No.: 09/813,235

Examiner: JASMIN, Lynda C.

Filed: March 19, 2001

Group: 3627

Title: TECHNIQUE FOR HANDLING SALES OF  
REGULATED ITEMS IMPLEMENTED OVER A  
DATA NETWORK

## CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on May 23, 2006.

Signed: Patricia Tate

Printed Name: Patricia Tate

## AMENDMENT F TRANSMITTAL

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

|                                                              | Claims After<br>Amendment |       | Highest<br>Previously<br>Paid For | Present<br>Extra | Small Entity<br>Rate Fee | Large Entity<br>Rate Fee |
|--------------------------------------------------------------|---------------------------|-------|-----------------------------------|------------------|--------------------------|--------------------------|
| Total Claims                                                 | 39                        | MINUS | 77                                | 00               | x 25 =                   | x 50 =                   |
| Independent<br>Claims                                        | 3                         | MINUS | 7                                 | 00               | x 100 =                  | x 200 =                  |
| Multiple Dependent Claim Present and Fee Not Previously Paid |                           |       |                                   |                  | \$                       | \$                       |
| Total                                                        |                           |       |                                   |                  | \$00.00                  | \$                       |

- ☐ Applicant(s) hereby petition for a \_\_\_\_\_ - month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-3874.
- ☒ Enclosed is a Credit Card Payment Form for the amount of \$180.00 to cover the Information Disclosure Statement.
- ☐ Please charge any additional fees required to facilitate filing the enclosed response, to Deposit Account No. \_\_\_\_\_ (Order No. \_\_\_\_\_).

Respectfully submitted,

C. Douglass Thomas  
Reg. No. 32,947